

The solubility of medicines in different menstrua is important to be known, and is here exhaustively treated; the results are carefully given in tabular form to facilitate reference.

Under Therapeutic and Practical Hints, Dr Tanner's rules for the practitioner are quoted, and Dr. Acland's scheme for systematic examination of patients is given in full. Following these are tables of doses, which are carefully compiled, and give evidence of considerable labour. In addition to the maximum doses, the approximate metric doses are given of several hundred articles of the *Materia Medica*, including everything that the prescriber would be likely to wish to refer to.

The doses for hypodermic use, for atomization, for gargles, collyria, douches, and enemata, and the different suppositories, are all explicitly stated. Baths and how to medicate them; pharmacopœial groups simplified for ready reference; lists of incompatibles; hints on prescribing, with more than one hundred selected prescriptions, and the remedies in use in the modern treatment of disease, follow in succession. Points in the management of infants, a table of eruptive diseases, syllabus of uterine inflammations, and obstetric memoranda, contain a great amount of useful information. Brief rules for the clinical examination of urine, chemically and microscopically, are sufficiently full for ordinary use. The work also considers poisons and antidotes, treatment of the apparently drowned, disinfectants and their practical application, and directions for preventing the spread of contagious diseases, dietetic rules and precepts, and other subjects too numerous to mention. The manner of conducting a post-mortem examination appropriately forms the concluding section of the book, and gives full instructions for the gross examination of all parts of the body.

The author may be congratulated upon his success in accomplishing his original design of giving to the busy practitioner a work of ready reference, containing in a compact and tangible shape practical information that will meet many of his daily needs. This he has done, and has done it in a careful and painstaking manner. The list of the principal remedial agents, arranged in conjunction with the diseases to which they are applicable, will supply to the practitioner a means of ready reference and a mine of useful therapeutic suggestions. The typography and press-work are excellent, and add greatly to the attractive appearance of the volume.

F. W.

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ART. XLI.—*Reports of American Hospitals for the Insane.*

1. *Northern Hospital for the Insane*, Wisconsin. Year ending Sept. 30, 1876.
2. *State Lunatic Hospital*, at Northampton, Mass. Year ending Sept. 30, 1876.
3. *State Lunatic Hospital*, at Worcester, Mass. Year ending Sept. 30, 1876.
4. *New Jersey State Lunatic Asylum*, at Trenton. Year ending Oct. 31, 1876.

1. DR. KEMPSTER, from the Hospital at Oshkosh, Wisconsin, has prepared a very readable sketch of the progress which the century has witnessed in the means and principles of treating the insane. He directs attention also to the supreme importance and the urgent duty of individual observance of the laws of health, and of the avoidance of marriages likely to entail disease and misery upon the issue, and onerous burdens upon the State.

In the matter of treatment, stress is laid upon the fact that insanity is a disease of debility, and that it requires and ought to receive a varied and generous diet. Economy, as well as humanity, demands it.

2. Following the drift, so common during the centennial year, of considering the past in the light of the present, Dr. Earle, of the Northampton Hospital, brings up the reported results of treatment in our insane hospitals when first founded, and shows that some of the figures could hardly have been simple expressions of fact, free from any tinge of fancy. Of their recent cases, some of the earlier superintendents, cured, as they reported, some 90, some 95, and some even 100 per cent. ! Results so different from those of their successors are to us a surprise and puzzle. With all our improvements, a much smaller success would content us. Though Dr. Earle suggests no explanation, some circumstances pointing thereto must have come under his observation. To vindicate, in some degree at least, the honesty of the early hospital men, some conditions peculiar to their time should be remembered. The institutions were few in number, and so imperfectly understood, that they obtained much less of the public confidence than after becoming more common. One result of this was, that of recent cases only those attended with high excitement, and unmanageable at home, were promptly placed in the hospitals. The quieter forms of disease took their chances at home. When we consider that the former class of cases have been found to be much more curable than the latter, and also that the latter come under hospital treatment, if at all, at a much later period, we can see one reason for the larger proportion of cures reported in the earlier days. Another reason may perhaps be found in the fact that, forty or fifty years ago, insanity was far less commonly accompanied by an exhausted vitality, and by those cerebral lesions especially prevalent of late years, resulting from fast living and excessive strain. General paralysis, now so fatal, was then unknown. It may have appeared occasionally before its true character was recognized; but we have reason to believe that the cases were very few. Dr. Bell, of the McLean Asylum, after becoming familiar with its features abroad, satisfied himself by a careful examination of his case-books, that not a single case of the disease had occurred here until a quite recent period.

Very likely this excessive proportion of cures is attributable in some degree, as Dr. Earle suggests, to the temperament of the physician, his "capacity for self-deception" and other "weaknesses of human nature." The "Hartford Retreat" and the "Worcester Hospital" had led the way to astonishing successes; and their contemporaries and successors felt bound in honour not to fall behind. Notions as to what constituted recovery were then rather loose. Indeed, a difficulty still exists; for who can always draw the line exactly between recovery and improvement? We know very well that one man would apply the one term, and another the other, to the same case. Making all allowances, and remembering the circumstances mentioned, we need not be greatly astonished that Dr. Bell, in 1840, should have declared that "all cases certainly recent recover under a fair trial" of hospital treatment. His next sentence, indeed, indicates that he had designed to state a general rule, rather than a literal fact. Every one who knew Dr. Bell is aware that no man was ever more honest and careful than he in drawing conclusions, or less disposed to write in an *ad captandum* spirit. At a later period he recognized the change in the character of mental diseases above noted, and also reported a much smaller percentage of recoveries.

We regret that Dr. Earle did not improve the opportunity to show his readers how little hospital statistics really teach us concerning the curability of insanity. A certain proportion of those discharged are adjudged recovered; but we ought not to infer that the others were all incurable. They were discharged, most frequently, not because the physician deemed them incurable, but because their friends, for one reason or another, ordered their removal. Thus the discharges of patients uncured, often indicate not so much the character of their malady, as the

temper and disposition of their friends. To ascertain how many of the patients entering our hospitals finally recover, would require investigation to be continued often long after their discharge. We are not aware that any attempt of this kind has been made in this country. In the January number of the *Journal of Mental Science*, Dr. Arthur Mitchell has recorded one conducted by himself; and it is an excellent specimen of such investigation. It does not fall within our present purpose to analyze its results, but we commend it to the attention of all who would like to see even one trustworthy examination of this subject.

3. In the report of the Worcester Hospital, Dr. Eastman improves his opportunity by bringing together a large number of quotations from the reports of the State hospitals, to show the utter falsity of some accusations recently brought against these institutions. Certain wiseacres, in a report made to the Massachusetts Legislature, ventured upon the extraordinary statement that "hospitals do not prevent insanity, because they do not, by the intercourse of their officers with society at large, by their published reports, and by their general relations to the public, seek to enlighten the people on the subject of insanity, its predisposing causes, its hereditary tendencies, its relations to intemperance, ignorance, poverty, and crime," etc. The extracts given in refutation of this most unfounded allegation, show that almost every report of the venerable institution at Worcester touches on the subjects mentioned. Our impression is, also, that more than half the reports from the other hospitals contain similar information and warning. The annual reports of a hospital in an adjoining State, from 1848 to 1867, have, in every instance save four, something on the causes of insanity, and occasionally the matter is treated at considerable length.

How the Legislature of the old Bay State is to be edified by reports like the one quoted, which, if read in the House, must have raised a smile even on the face of the venerable codfish looking down from his coigne of vantage over the Speaker's chair, is a question beyond our power to answer. If people would inform *themselves*, before undertaking to enlighten the public, much ink and paper would be saved.

4. The New Jersey Hospital at Trenton has lost the services of the distinguished physician, who has for a quarter-century superintended its affairs with such eminent ability. Dr. Buttolph, having been called to the corresponding position in the new asylum at Morristown, has been succeeded at Trenton by Dr. Ward, for nine years past assistant physician at the older institution.

Speaking of the tendency of insane hospitals to become filled up with chronic incurables, Dr. Ward earnestly urges the importance of an early resort to hospital treatment. Far too often the asylum is the last move instead of the first. The development of insanity is frequently so gradual that the disease is hopelessly confirmed before the grosser and more demonstrative symptoms appear.

Dr. Ward attaches the very highest value to chloral as a sleep-procurer. He finds it safe, prompt, and free from unpleasant after effects. The disagreeable and dangerous results which have led many physicians to distrust and fear this drug, he attributes to changes produced in it by light and air, and to the use of a poor article. German chloral, freshly dissolved in spring-water, in the dose of fifteen or twenty grains at bedtime, gives perfectly satisfactory results. "Croton chloral and the crystallized chloral have in our hands proved quite unreliable." The bromides have lessened the force and frequency of epileptic seizures, but had no curative action in old cases. In a few cases of incipient epilepsy, the medicine has seemed to cure.

B. L. R.